



Common Application for Semester/Year Study Abroad Programs during Academic Year 2010-11

Check: Fall 20____ Spring 20____ Brisbane Florence Galway
 Managua Rouen Syracuse Other (specify)_____

APPLICATION FOR ADMISSION

Please type or print legibly in ink. Applications will be considered only when the all items have been received:

- This application completed in full, signed by the applicant and parent (if under 21)
- A nonrefundable application fee of \$75. Make check payable to Fairfield University
- A brief essay written and signed by the applicant
- Official transcript of the college the applicant presently attends
- Two academic references (see www.fairfield.edu/studyabroad)
- Form completed by your Dean of Students (see website)
- Completed request for Transcript Form (for non-Fairfield University students only), on website
- One passport-size photo
- **Other items for specific destinations are available on the appropriate page of our website.**

You MUST have a passport that is valid for at least 6 months beyond your stay abroad. If you don't, apply today!

PART A – PERSONAL INFORMATION

Name _____ Gender _____

Fairfield ID or Social Security # _____ E-mail _____

School/College _____ Cell phone _____

Campus address, box # _____

Permanent Address _____

_____ Phone _____

Date of Birth _____ Place of Birth _____ Citizen of _____

Major _____ Minor _____

Ethnic background (optional): White (including Spain and Portugal) Black (non-Hispanic) Latino (including Puerto Rico) Asian (including Indian subcontinent)
 Pacific Islander or native Hawaiian American Indian or Alaskan native Other (specify)_____

Father's Name and Address _____

Occupation _____ Phone(work) _____ (home) _____

Cell Phone _____ E-mail _____

Mother's Name and Address _____

Occupation _____ Phone (work) _____ (home) _____

Cell Phone _____ E-mail _____

Who should be notified in case of emergency? _____

How did you learn about the Fairfield Program? _____

AGREEMENT AND RELEASE

I (we), the undersigned (for applicant and parent/guardian unless waived), an applicant for a Fairfield University Study Abroad Program (hereafter referred to as the Program), do waive and release all claims against Fairfield University and its agents, any tour organization or arranger employed or utilized by the University, host schools or institutes, for any injury, loss, damage, accident, delay or expense resulting from the use of any vehicle, strikes, war, weather, sickness, quarantine, government restrictions or regulations, or arising from any act or omission of any airline, railroad, bus company, taxi service, hotel, restaurant, school or other firm, agency, company or individual. I also release Fairfield University and its agents and agree to indemnify them with regard to any financial obligations that I may personally incur or any damage or injury to the person or property of others that I may cause, while participating in the Program.

I hereby grant Fairfield University and its agents full authority to take whatever actions they may consider to be warranted under the circumstances regarding my health and safety, and I fully release each of them from any liability for such decision or actions as may be taken in connection therewith. I authorize Fairfield University and its agents, at their discretion, to place me, at my own (or my parents') expense, and without my further consent, in a hospital within or outside the United States for medical services and treatment, or, if no hospital is readily available, to place me in the hands of a local medical doctor for treatment. If deemed necessary or desirable, I authorize them to transport me back to the United States by commercial airline or otherwise at my own (or my parents') expense for medical treatment. In the event that Fairfield University or its agents advance or loan any monies to me, or incur special expenses on my behalf while I am abroad, I (and my parents) agree to make immediate repayment upon my return.

I will comply with Fairfield University rules, standards and instructions for student behavior, as well as those of the University's partners abroad. I hereby waive and release all claims against Fairfield University and its agents arising at a time when I am under direct supervision of its agents or arising out of my failure to remain under such supervision or comply with such rules, standards and instruction; and I agree to indemnify the Fairfield University and its agents against any consequences thereof. I agree that the university shall have the right to enforce appropriate standards of conduct and that it may at any time terminate my participation in the program for failure to maintain these standards, or for any actions or conduct considered to be incompatible with the interest, harmony, comfort and welfare of other students. If my participation is terminated, I consent to being sent home at my own (or my parents') expense with no refund of fees.

I understand that Fairfield University is not responsible for any injury or loss whatever suffered by me during periods of independent travel (which I understand are unsupervised) or during any absence from the Program supervised activities. On group tours or other activities arranged by Fairfield University, I will accept the will of the majority whenever a matter of choice is presented to the group. I will also accept in good faith the instructions and suggestions of the Program Director(s) in all matters relating to the Program or the personal conduct of Program participants.

I understand that Fairfield University reserves the right to make cancellations, changes or substitutions in cases of emergency or changed conditions in the interest of the group. In addition, I understand that the Program fees are based on lodging rates and travel costs currently in force and are subject to minor change. I also understand that if I leave the Program voluntarily for any reason, there will be no refund of tuition fees already paid.

All references in the Agreement and Release to Fairfield University and "its agents" shall include the University and all of its Program Directors, staff members, campus directors and affiliated organizations. All references herein to "parents" of the applicant shall include the legal guardian or other adults responsible for the applicant.

Signature of Applicant _____ Date _____

I certify that I am the parent or legal guardian of the above applicant, and that I have read the foregoing Agreement and release (including such parts as may subject me to personal financial responsibility) and hereby relinquish any claims that I might have against Fairfield University or its agents (as set forth above), both on my behalf and in my capacity as legal representative of the applicant, including, with limitation, any claim arising as a result of the applicant's leaving the supervision of the Program Director(s), or at a time when the applicant has left the supervision of the Program Director(s).

Signature of Parent or Guardian _____ Date _____

(Required for students who are not yet age 21)

PERSONAL PROFILE (For Florence and Brisbane Programs Only)

Name _____ School _____

Please complete the following questionnaire so that our staff can match you with roommates whose habits most closely resemble your own. Circle the point on the scale which most closely describes you and/or your living habits.

I read a great deal	•	•	•	•	•	I don't read very much
I am extroverted	•	•	•	•	•	I am introverted
I enjoy sports	•	•	•	•	•	I'm not interested in sports
I plan to travel all the time	•	•	•	•	•	I'll stay mostly in my host country
I listen to music a lot	•	•	•	•	•	I don't listen to much music
I like walking / biking	•	•	•	•	•	I dislike walking / biking
I have a lot of friends	•	•	•	•	•	I have one or two close friends
I go to bed late	•	•	•	•	•	I go to bed early
I like cooking	•	•	•	•	•	I dislike cooking
I am tidy	•	•	•	•	•	I am untidy
I really enjoy parties & clubbing	•	•	•	•	•	I prefer other kinds of activities
I prefer many flatmates	•	•	•	•	•	I prefer only one flatmate

Note: Bedrooms in Florence are double occupancy; in Brisbane, single occupancy

Do you wish to live in a smoking situation or not? Check one: Smoking Non-Smoking Don't Care

Smoking issues are the biggest problems among roommates. If you smoke and request to live in non-smoking quarters, you are hereby pledging not to smoke indoors. It is unfair to non-smokers and those with allergies and asthma for smokers to request non-smoking housing and then smoke indoors. Please be honest with us, yourself, and your roommates.

Age _____ Male Female Program: Fall Spring Year in School: _____

Is there anything else we should know about you? Please mention any specific requests, likes/dislikes, and other information that will help us assign your roommate(s). Keep in mind that while we make every effort, we cannot accommodate every request.

Provide the name(s) of any student(s) you wish to live with. **All students who wish to live together must list each other on their applications.** We cannot guarantee that more than 2 students will be placed in the same apartment.

